

### Inventor Information

Inventor One Given Name:: Anne  
Family Name:: Hover  
Name Suffix::  
Postal Address Line One:: 8721 Village Road  
Postal Address Line Two::  
City:: Playa Del Rey  
State or Province:: CA  
Country::  
Postal or Zip Code:: 90293  
City of Residence:: Playa Del Rey  
State or Prov. of Residence:: CA  
Country of Residence::  
Citizenship Country:: U.S.A.

Inventor Two Given Name:: Dr. Roy  
Family Name:: Sanders  
Name Suffix::  
Postal Address Line One:: 3611 Beach Drive  
Postal Address Line Two::  
City:: Tampa  
State or Province:: FL  
Country::  
Postal or Zip Code:: 33629  
City of Residence:: Tampa  
State or Prov. of Residence:: FL  
Country of Residence::  
Citizenship Country:: U.S.A.

Inventor Three Given Name::: Donald Martin  
Family Name::: Sturgeon  
Name Suffix:::  
Postal Address Line One::: 9 Saddle Lane  
Postal Address Line Two:::  
City::: Wilmington  
State or Province::: DE  
Country:::  
Postal or Zip Code::: 19803  
City of Residence::: Wilmington  
State or Prov. of Residence::: DE  
Country of Residence:::  
Citizenship Country::: U.S.A.

Given name of Applicant::  
Family Name::  
Name Suffix::  
Authority under 1.42::  
Authority under 1.43::  
Authority under 1.47::  
Postal Address Line One::  
Postal Address Line Two::  
City::  
State or Province::  
Country::  
Postal or Zip Code::  
City of Residence::  
State or Prov. of Residence::  
Country of Residence::  
Citizenship Country::

#### Correspondence Information

Correspondence Customer Number:: 00164  
Telephone:: 612/339-1863  
Fax:: 612/339-6580  
Electronic Mail:: jdshewchuk@kinney.com

#### Application Information

Title Line One:: Bone Fracture Support Implant  
Title Line Two:: With Non-Metal Spacers (As amended)  
Total Drawing Sheets:: 5  
Formal Drawings?:: Y  
Application Type:: Utility  
Docket Number:: A227.12-0055  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Application?::

#### Representative Information

Representative Customer Number:: 00164

Continuity Information

This application is a:: Continuation of  
> Application One:: 09/289,324  
Filing Date:: April 9, 1999  
Patent Number::  
which is a::  
>> Application Two::  
Filing Date::  
Patent Number::

Prior Foreign Applications

Foreign Application One::  
Filing Date::  
Country::  
Priority Claimed::

Assignee Information

Name:: DePuy Orthopaedics, Inc.  
Address line one:: 700 Orthopaedic Drive  
Address line two:: P.O. Box 988  
City:: Warsaw  
State or Province:: IN  
Postal or zip code:: 46581-0988